

DATE RECIEVED:	_
APPLICATION REVIEW FEE:	
ESCROW FEE:	
SUBDIVISION FEE:	

SUBDIVISION SITE PLAN REVIEW APPLICATION

Check if this application is a \square REVISION to an approved plan.

□MINOR OR □ MAJOR			
	25 Subdivision of Land		
PROPERTY OWNER(S) INFORMATION Name(s):			
Name(s):Address:			
Phone Number:			
Email:			
APPLICANT(S) INFORMATION Name(s): Address: Phone Number: Email:			
PROPERTY INFORMATION			
Location:			
Tax Map Parcel #:			
Current Zoning District:			
Proposed Zoning District:			
ENGINEER/SURVEYOR INFORMATION Name:			
BRIEFLY DESCRIBE PROPOSED SUBDIVISION PROJECTION			
	ESS CAN BE FOUND IN THE TOWN CODE AT D SUBDIVISION OF LAND		
Subdivision Fee - \$450.00 per Lot/Unit/Site	Lots/Units/Sites v \$450 00 - \$		
20% Due with application. Check# Date:	_ Εσεί επιεί διεέ Α φτεσίου – φ		
80% Due at final approval. Check# Date:			
I/We hereby apply to the Town of Millville for a Subdivision Site Plan Approval on the property described above and certify that all the information and attached documentation provided by me/us in the application is correct.			
Property Owner Signature	Date		
Applicant Signature	Date		
TOWN USE ONLY			
APPROVAL DATE:	DENIED DATE:		
ADMINISTRATIVE OFFICIAL:			